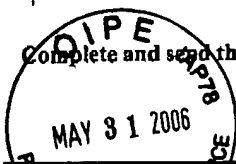


PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 or **Fax** (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee communications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

21874 7590 03/24/2006

EDWARDS & ANGELL, LLP
 P.O. BOX 55874
 BOSTON, MA 02205

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Amy Leahy (Depositor's name)
 (Signature)
 May 31, 2006 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/690,077	10/21/2003	David T. MacLaughlin	62025DIV(51588)	4824

TITLE OF INVENTION: DELIVERY OF THERAPEUTIC BIOLOGICALS FROM IMPLANTABLE TISSUE MATRICES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	06/26/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
KAUSHAL, SUMESH	1633	424-093210

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page list:

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

01 FC:2501
 02 FC:1504
 03 FC:1504
 04 FC:1504
 05 FC:1504
 06 FC:1504
 07 FC:1504
 08 FC:1504
 09 FC:1504
 10 FC:1504
 11 FC:1504
 12 FC:1504
 13 FC:1504
 14 FC:1504
 15 FC:1504
 16 FC:1504
 17 FC:1504
 18 FC:1504
 19 FC:1504
 20 FC:1504
 21 FC:1504
 22 FC:1504
 23 FC:1504
 24 FC:1504
 25 FC:1504
 26 FC:1504
 27 FC:1504
 28 FC:1504
 29 FC:1504
 30 FC:1504
 31 FC:1504
 32 FC:1504
 33 FC:1504
 34 FC:1504
 35 FC:1504
 36 FC:1504
 37 FC:1504
 38 FC:1504
 39 FC:1504
 40 FC:1504
 41 FC:1504
 42 FC:1504
 43 FC:1504
 44 FC:1504
 45 FC:1504
 46 FC:1504
 47 FC:1504
 48 FC:1504
 49 FC:1504
 50 FC:1504
 51 FC:1504
 52 FC:1504
 53 FC:1504
 54 FC:1504
 55 FC:1504
 56 FC:1504
 57 FC:1504
 58 FC:1504
 59 FC:1504
 60 FC:1504
 61 FC:1504
 62 FC:1504
 63 FC:1504
 64 FC:1504
 65 FC:1504
 66 FC:1504
 67 FC:1504
 68 FC:1504
 69 FC:1504
 70 FC:1504
 71 FC:1504
 72 FC:1504
 73 FC:1504
 74 FC:1504
 75 FC:1504
 76 FC:1504
 77 FC:1504
 78 FC:1504
 79 FC:1504
 80 FC:1504
 81 FC:1504
 82 FC:1504
 83 FC:1504
 84 FC:1504
 85 FC:1504
 86 FC:1504
 87 FC:1504
 88 FC:1504
 89 FC:1504
 90 FC:1504
 91 FC:1504
 92 FC:1504
 93 FC:1504
 94 FC:1504
 95 FC:1504
 96 FC:1504
 97 FC:1504
 98 FC:1504
 99 FC:1504
 100 FC:1504

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 1.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

The General Hospital Corporation

Boston, Massachusetts

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☐ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☐ Advance Order - # of Copies _____

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.
☐ Payment by credit card. Form PTO-2038 is attached.
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 04-1105 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Amy M. Leahy

Date

May 31, 2006

Typed or printed name

Amy M. Leahy

Registration No.

47,739

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**FAX TRANSMISSION****DATE:** May 31, 2006**PTO IDENTIFIER:** Application Number 10/690,077-Conf. #4824
Patent Number**Inventor:** David T. MacLaughlin et al.**MESSAGE TO:** MS ISSUE FEE**FAX NUMBER:** (571) 273-2885**FROM:** EDWARDS ANGELL PALMER & DODGE LLP
Amy M. Leahy**PHONE:** (203) 975-7505**Attorney Dkt. #:** 62025DIV(51588)**PAGES (Including Cover Sheet):** 3**CONTENTS:** Fee Transmittal (1 page)
Charge \$1,000.00 to deposit account 04-1105
Certificate of Transmission (1 page)

If your receipt of this transmission is in error, please notify this firm immediately by collect call to sender at (203) 975-7505 and send the original transmission to us by return mail at the address below.

This transmission is intended for the sole use of the individual and entity to whom it is addressed, and may contain information that is privileged, confidential and exempt from disclosure under applicable law. You are hereby notified that any dissemination, distribution or duplication of this transmission by someone other than the intended addressee or its designated agent is strictly prohibited.

EDWARDS ANGELL PALMER & DODGE LLP
P.O. Box 55874, Boston, Massachusetts 02205
Telephone: (203) 975-7505 Facsimile: (617) 439-4170



3:27PM

EDWARDS ANGELL PALMER & DODGE

No. 2115 P. 2

PTO/SB/97 (09-04)
Approved for use through 07/31/2006. OMB 0651-0031
U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Application No. (if known): 10/690,077

Attorney Docket No.: 62025DIV(51588)

Certificate of Transmission under 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office.

on May 31, 2006
Date

Signature

Denise Kadinski

Typed or printed name of person signing Certificate

Registration Number, if applicable

Telephone Number

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

Fee Transmittal (1 page)

Charge \$1,000.00 to deposit account 04-1105



Approved for use through 7/31/2008. OMB 0851-0032
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL For FY 2006		Complete if Known	
		Application Number	10/690,077-Conf. #4824
		Filing Date	October 21, 2003
		First Named Inventor	David T. MacLaughlin
		Examiner Name	Sumesh Kaushal
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	1633
TOTAL AMOUNT OF PAYMENT (\$) 1,000.00		Attorney Docket No.	62025DN(51588)

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 04-1105 Deposit Account Name: Edwards Angell Palmer & Dodge LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
Fee Description						Small Entity Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims <u>8</u> - 54 = _____		Extra Claims <u>0</u>	Fee (\$) _____	Fee Paid (\$) _____	Multiple Dependent Claims		
					Fee (\$) _____	Fee Paid (\$) _____	
Indep. Claims <u>3</u> - 3 = _____		Extra Claims <u>0</u>	Fee (\$) _____	Fee Paid (\$) _____			
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets _____	Extra Sheets _____	Number of each additional 50 or fraction thereof _____	Fee (\$) _____	Fee Paid (\$) _____			
_____ - 100 = _____ / 50		_____ (round up to a whole number) x _____					
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)						Fee Paid (\$) _____	
Other (e.g., late filing surcharge): 2501 Utility issue fee						700.00	
1504 Publication fee for early, voluntary, or normal ...						300.00	

SUBMITTED BY			
Signature	<i>Amy M. Leahy</i>	Registration No. (Attorney/Agent)	47,739
Name (Print/Type)	Amy M. Leahy	Telephone	(203) 975-7505
		Date	May 31, 2006

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted by facsimile to the Patent and Trademark Office, facsimile no. (571) 273-2885, on the date shown below.	
Dated: May 31, 2006	Signature: <i>Denise Kacinski</i> (Denise Kacinski)



FEE SUMMARY SHEET
Fee Transmittal (PTO SB-17)

Date: May 31, 2006
Time: 3:18 PM
Docket: 62025DIV(51588)

Filing Date: October 21, 2003
Application No: 10/690,077
Total Fee: \$ 1,000.00

Code	Amount	37 CFR	Fee Description	Listed on
2501	700.00	1.18(a)	Utility issue fee	Fee Transmittal (PTO SB-17)
1504	300.00	1.18(d)	Publication fee for early, voluntary, or normal publication	Fee Transmittal (PTO SB-17)